## Best Available Copy

PATENT	APPLICATION	FFF DETERM	<b>INATION RECORD</b>
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Application or Docket Number

KAN	5-E	RP32
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Lifective October 1, 2000								KAI	1 1	- RP	32	
		S FILED - PART I (Column 1)		SIV		SMALI TYPE	SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS		5		٠.			E	FEE	1	RATE	FEE	
FOR		NUMBER FILED		NUME	NUMBER EXTRA		FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS				*	ф		)=		OR	X\$18=		
INDEPENDENT CLAIMS			L	nus 3 =	*	P	X40	=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PI			RESENT	· · · · · · · · · · · · · · · · · · ·			+135	;=		OR	+270=	
* If the difference in column 1 is			less than ze	ero, ente	r "0" in d	column 2	TOTA	۱L		OR	TOTAL	7/0
	С	LAIMS AS A	MENDE	- PAR	TII					•	OTHER	
		(Column 1)		(Colu		(Column 3)	SMA	LL E	ENTITY	OR	SMALL	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE	t .	RATE	ADDI- TIONAL FEE
NDN	Total	•	Minus	**		=	X\$ 9=	-		OR	X\$18=	1 - š.
AME	Independent	NTATION OF MI	Minus	***	F CL AINA		X40	=		OR	X80=	
<u> </u>	FINST PHESE	INTATION OF MI	JUITPLE DEI	PENDEN	CLAIM		+135	_		OR	+270= .	
							TO' ADDIT. F		<del></del>	OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	mn 2)	(Column 3)	ADDIT. F	CEL			ADDII. FEEI	
AMENDMENT B	/	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	RATI	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	-		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	CL AIAA	=	X40=	=		OR	X80=	
	THOTTHESE	MIATION OF MIC		ENDENT	CLAIM		+135	_		OR	+270=	
							TO ADDIT. F	AL			TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)	ADDIT. I				ADDIT. FEEL	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9:	=		OR	X\$18=	
	Independent FIRST PRESE	* INTATION OF MU	Minus	*** PENDENT	CLAIM	=	X40=			OR	X80=	
				T. ADEIAI	CEAUN		+135:	_		OR	+270=	
<ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."</li> </ul>						TOT				TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.								L				